

12. Appendix 2: Mental Health Support

Everyone deals with the experience of arrest and being held in custody in different ways. Some people might have found it okay, and others may have found it deeply traumatic. You can never assume what arrest may have been like for someone.

If you've been arrested yourself in the past, it's often not that helpful to talk about your arrest, as other people may have had a totally different experience. Instead of entering a situation with preconceived ideas about how another person might feel, try to be open-minded, non-judgemental and ready to listen.

A helpful acronym to remember for acute mental health support is **RAISED**.

- Risk: Consider and balance the risks to yourself, the arrestee and others associated with helping the arrestee and decide whether and how much to intervene.
- Affect: Consider the overriding emotion of the crisis (depression/suicidality, panic, perceiving a different reality etc.) and adjust accordingly.
 - If the person is panicking, reassure them of the safety and support systems they have and offer assistance to work through or minimise stressors if you can. Don't minimise the stressors, but assure the person that they're up to the task.
 - If they're depressed or suicidal, talk about future plans, reassure them that problems can be dealt with, and act as
 if it's assumed that they'll be around to take part in future activities. If you know the arrestee, it can be helpful to
 plan a low-key meet-up the day after or a few days after the arrest.
 - If they're perceiving a different reality to you, don't contradict their perception unless they ask you to or told you to do so in advance. Ask questions to help you understand what they're perceiving, such as 'That sounds pretty overwhelming, do you think you'd be able to explain how that's making you feel?'
 - If they're nonverbal, provide time and space, reduce possible stressors (including environment) and offer paper or a digital notebook to pass messages.
 - If they appear to be 'splitting' or having sudden emotional swings, respect that the person's emotions are real in the current moment and not 'fake feelings' or equivalent. However, try not to internalise behaviour or language about yourself or others if it is different to how the person usually behaves. Use language to describe their feelings, such as 'It looks like you're feeling really frustrated right now.'
- In and out: Try to find out when the person last took in food, water, medication and other substances and see if you can provide or limit any of the above. Often arrestees haven't had adequate food, which can exacerbate panic and feelings of disorientation.
- Stressors: Consider what factors in the person's life are making things worse, and consider if these can (plan to be) removed or dealt with.
- Environment: Consider environmental factors such as noise, temperature, dangers, triggers and people and see if these can (plan to) be removed. This often means supporting arrestees to go somewhere safer, away from the police station, and potentially travelling with them to get there.
- **Diagnosis**: Last and least importantly, consider any (informal or otherwise) diagnoses that arrestees may have, and adjust accordingly.

Some people might want to talk about the experience of arrest they've just had, and some might not at all – don't pressure people either way. When listening to someone share how they're feeling or what's happened to them you may like to remember the acronym PROBLEMS for active listening:

- Pause: Make sure to leave space for the person to talk and don't be afraid of silence.
- Rephrase: Paraphrasing something the person has said back in your own words to check an/or illustrate that you understand.
- Open-ended questions: Ask questions starting with words like 'What' or 'How' rather than those which have yes
 or no answers.
- Body language: Don't impose same norms on everyone but mirror some aspects of the person's body language if you can, such as eye contact/
- Label emotions: Name emotions, such as 'it seems like you're feeling really frustrated about this' or 'that sounds like it felt really scary' as a way to validate and show you're listening even if you don't agree or can't relate at all to the actual content of what they're saying.
- Encouragers: Brief sounds or gestures like 'uh-huh, 'I see', nodding etc show that you're paying attention without interrupting.
- Mirror: This is the cliched therapist thing of repeating back a few words from someone's sentence. Don't overdo this but it can be helpful if you're stuck about what to say mirroring and leaving a pause can be good way to encourage someone to expand.
- Summarise after you've been speaking to them, summarise to check that you've understood what's happening
 with the person and how they feel about it.